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Page 2 of 2

Applicant or Patentee : Christopher J. Klein et al.
For : SYSTEM AND METHOD FOR REMOTE OPENING OF HANDICAP
ACCESS DOORS

**VERIFIED STATEMENT (DECLARATION) CLAIMING SMALL ENTITY STATUS
(37 C.F.R. § 1.9(F) AND 1.27 (D)) - NONPROFIT ORGANIZATION**

I hereby declare that I am an official empowered to act on behalf of the nonprofit organization identified below:

Name of Organization: oneLINK
Address of Organization: 854 South Washington, Suite 450
Holland, Michigan 49423

Type of Organization:

- ☐ University or Other Institution of Higher Education
☒ Tax Exempt under Internal Revenue Service Code (26 U.S.C. § 501(a) and 501(c)(3))
☐ Nonprofit Scientific or Educational Under Statute of State of the United States of America:
(Name of State/Citation of Statute)
☐ Would Qualify as Tax Exempt under Internal Revenue Service Code (26 U.S.C. § 501(a) and 501(c)(3)) if Located in the United States of America
☐ Would Qualify as Nonprofit Scientific or Educational under Statute of State of the United States of America if located in the United States of America: (Name of State/Citation of Statute)

I hereby declare that the nonprofit organization identified above qualifies as a nonprofit organization as defined in 37 C.F.R. § 1.9(c) for purposes of paying reduced fees under Section 41(a) and (b) of Title 35, United States Code with regard to the invention entitled SYSTEM AND METHOD FOR REMOTE OPENING OF HANDICAP ACCESS DOORS by inventor Christopher J. Klein et al. described in:

- ☒ the specification filed herewith
☐ application serial No. _____, filed _____
☐ patent No. _____, issued _____

I hereby declare that rights under contract or law have been conveyed to and remain with the nonprofit organization with regard to the above-identified invention.

If the rights held by the nonprofit organization are not exclusive, each individual, concern, or organization having rights to the invention is listed below* and no rights to the invention are held by any person, other than the inventor, who could not qualify as an independent inventor under 37 C.F.R. § 1.9(c) or by any concern which would not qualify as a small business concern under 37 C.F.R. § 1.9(d) or a nonprofit organization under 37 C.F.R. § 1.9(e). *NOTE: Separate verified statements are required from each named person, concern, or organization having rights to the invention averring to their status as small entities (37 C.F.R. § 1.27).

FULL NAME

ONELINK

ADDRESS

854 S. WASHINGTON SUITE 450 HOLLAND MI 49423

() Individual () Small Business Concern (X) Non-Profit Organization

FULL NAME

ADDRESS

ONELINK 854 S. WASHINGTON SUITE 450 HOLLAND MI 49423

() Individual () Small Business Concern (X) Non-Profit Organization

I acknowledge the duty to file, in this application or patent, notification of any change in status resulting in loss of entitlement to small entity status prior to paying, or at the time of paying, the earliest of the issue fee or any maintenance fee due after the date on which status as a small entity is no longer appropriate (37 C.F.R. § 1.28(b)).

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further, that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application, any patent issuing thereon, or any patent to which this Verified Statement is directed.

Signature:

Thomas L. Welling

Dated:

1/04/01

Name of Person Signing:

Thomas L. Welling

Title:

President

Address of Person Signing:

854 South Washington, Suite 450
Holland, Michigan 49423